Most important to my home State of Hawaii, the amendment provides retirement equity to Federal employees in Hawaii. Alaska, and the territories. More than 23,000 Federal employees in Hawaii, including more than 17,000 Defense Department employees and another 30,000 Federal employees in Alaska and the territories, currently receive a cost-of-living allowance which is not taxed and does not count for retirement. Because of this, workers in the nonforeign areas retire with significantly lower annuities than their counterparts in the 48 States and DC. COLA rates are scheduled to go down later this year, along with the pay of nearly 50,000 Federal employees if we do not provide this fix.

In 2007, I introduced the Non-Foreign Area Retirement Equity Assurance Act. The bill passed the Senate by unanimous consent in October 2008. Unfortunately, the House did not have time to consider the bill before adjournment.

I reintroduced S. 507, which is included in the amendment, with Senators Murkowski, Inouye, and Begich. It is nearly identical to the bill that passed the Senate last year. It is a bipartisan effort to transition employees in Hawaii, Alaska, and the territories to the same locality pay system used in the rest of the United States while protecting employees' take-home pay. The measure passed unanimously through the committee on April 1, 2009.

The second provision I wish to highlight corrects how employees' annuities are calculated for part-time service under the Civil Service Retirement System. This provision removes a disincentive that now discourages Federal employees near retirement from working on a part-time basis while phasing into retirement. It would treat Federal employees under CSRS the same way they are treated under the newer Federal Employee Retirement System.

The third provision I wish to discuss would allow FERS participants to apply their unused sick leave to their length of service for computing their retirement annuities as is done for CSRS employees. The Congressional Research Service found that FERS employees within 2 years of retirement eligibility used 25 percent more sick leave than similarly situated CSRS employees. OPM also found that the disparity in sick leave usage costs the Federal Government approximately \$68 million in productivity each year. This solution was proposed by Federal managers who wanted additional tools to build a more efficient and productive workplace and to provide employees with an incentive not to use sick leave unnecessarily near retirement.

Finally, I wish to add that this amendment will make good on the recruitment promise made to a small group of Secret Service agents. Approximately 180 Secret Service agents and officers hired from 1984 through 1986 were promised access to the DC Police and Firefighter Retirement and

Disability System. This amendment is meant to provide narrow and specific relief only to this small group of agents and officers by allowing them to access the retirement system they were promised at the time they were hired.

I strongly encourage my colleagues to support this amendment, the Federal retirement reform provisions, and the bill.

Mr. President, I yield the floor. The PRESIDING OFFICER. The Senator from Washington.

MORNING BUSINESS

HEALTH CARE REFORM

Mrs. MURRAY. Mr. President, if you look at the front cover of newspapers across the country this week or watch cable news each day, it is pretty clear that the rhetoric on health care reform is really heating up. Whether it is threats from the other side of the aisle to "break" a President who has made health care reform a priority or whether it is the million-dollar ad buys from interest groups we are seeing or whether it is political pundits, health care rhetoric is reaching a fever pitch. In fact, the discourse here in Washington, DC, has gotten so loud that the voice of American families is being drowned

These days, those who need reform the most are the ones being heard from the least. That is why 3 weeks ago I sent an e-mail to many of my constituents asking them to share with me their personal stories of dealing with our health care system and asking them for their ideas for reform. So far, I have received in just a few short weeks over 5,000 e-mails into my office with deeply personal and often very painful stories from every corner of my State. Yesterday, I came to the floor to share several of those stories. They were the stories of women who had lost their insurance, and due to an inability to get care when they needed it most, they lost their lives. Many of the letters I have received, such as those I spoke about yesterday, tug at the heart strings. But today, this evening, I wish to talk about what so many Americans are concerned about right now: their purse strings.

I understand many Americans are satisfied with the level of care their insurance provides. These are the Americans who can get in to see a doctor when they need one, and they receive good, quality care. These are the Americans who want to know what is in it for them: What will I get out of reform? And with all of their other problems, why should we pay for it right now? These are good questions to which the American people deserve a good answer.

It is not just the uninsured who are impacted by not being able to access preventive medicine or having to seek costly care in the emergency room.

These costs get passed on to those with insurance in the form of higher insurance premiums. In fact, it is estimated that a family of four today here in this country is paying an added \$1,000 in premiums a year to help pay for those who don't have any coverage. Essentially, families with health insurance today are paying a hidden tax. That tax is hurting our families who are insured, it is hurting our businesses, and it has to end.

Health care reform will do that. By creating a competitive pool of insurance options, including a public option, we can bring down the costs and the premiums to families in the long run. We are going to be moving to a system that rewards innovation and healthy outcomes, and because Americans will have a choice of insurance plans, insurance providers will be forced to lower costs so they can be competitive.

The existence of a pool of insurers to choose from means that if you lose your job, you don't lose your insurance. If you want to change jobs or maybe even start a business, there is a health care option for you. And we make it easier for small businesses to provide coverage for their employees by having them pay for up to half the cost of health insurance for businesses with 50 or fewer workers. Accordingly, we also prohibit insurance companies from charging higher premiums for women or for the elderly, and we end the practice of denying coverage to those people with preexisting conditions. And for the first time, we put a priority on prevention and wellness. If we invest in community-based programs to improve nutrition or prevent smoking or increase fitness, we are going to save taxpayers nearly \$16 billion a year within 5 years.

So health care reform, when we talk about it here, will make health care coverage more affordable, portable, and undeniable.

Let me give a real-life example of someone who has health insurance today but would benefit greatly from the health care reform we are talking about. One of the letters I recently received is from Patricia Jackson, who lives in Woodinville, WA. I suspect her story will sound pretty familiar to most Americans.

Patricia and her family have private insurance that is paid for each month through premiums that come directly out of Patricia's paycheck. But as is the case with many middle-class families, the burden of those premium payments is rapidly rising. To provide care for her family of four, Patricia paid \$840 a month in 2007. Then last year her payments jumped to \$900 a month. Today she is paying \$1,186 in premiums to provide care for her family every month.

Unfortunately, for too many families, Patricia's story isn't the exception, it is the rule. It is exactly what they are seeing in their homes with their premiums.

Health insurance premiums for working families in Washington State have

skyrocketed in recent years. In fact, according to a study by Families USA, from 2000 to 2007, premiums increased by 86.6 percent.

Let me say that again. Over an 8-year period, premiums in my home State of Washington increased by 86.6 percent. But over that same period of time, wages in my State only grew by 16 percent.

Health care premiums are taking a bigger and bigger chunk out of families' paychecks. Health insurance premiums rose over five times faster than median earnings, and that problem is not going away.

For a lot of our average middle-class families who are struggling to make mortgage payments or to send their kids to college today, this is a situation that cannot continue. They can't afford it. If we don't have meaningful health care reform, it is a trend that is going to continue indefinitely.

This reform can't come a moment too soon. Two weeks ago, Patricia's—who I just talked about—insurance company, which is the largest private insurance company in my home State, announced another dramatic increase in premium. They told Patricia, and a lot of other families in my State, that starting on August 1, this company is going to raise premiums for 135,000 enrollees by an average of 17 percent more—17 percent more from what I just told you.

A front-page story in the Seattle Times, the day after that hike was announced, quoted Gail Petersen, who lives in north Seattle, who says that news means her premiums are going to rise by \$300. She said:

I would love to see insurance companies have a little competition.

So would Patricia Jackson. In fact, Patricia recently contacted my office again to let me know that, starting on August 1, her new premiums will be over \$1,400 a month. That is unaffordable. It is unsustainable for Patricia, for America's families, for our businesses, and for America's future economic strength.

Health care reform isn't just for the uninsured, it is for people such as Patricia and Gail and the millions of others who have health insurance right now, who have played by the rules, but whose paychecks and futures are being gouged by a system that lacks accountability, lacks competition, and lacks reason.

Unfortunately, we are hearing from some of our friends on the other side who want to prevent meaningful, comprehensive reform from ever moving forward.

Just as unfortunate are their motives. We heard a Member of our Senate say he wants to protect the status quo. He said:

If we are able to stop Obama on this, it will be his Waterloo, it will break him.

Mr. President, that type of posturing is playing games with real lives and real people in order to score cheap political points. Blocking health care reform won't break the President of the United States of America, but it will break American families, it will break American businesses; it will break the bank

America deserves better. Congress knows that most Americans like their doctors, their providers, and their coverage. On the days they need to see a doctor, they are glad they can provide their families with coverage for booster shots, checkups, preventive, and even emergency care. But on payday, it is a very different story.

For those of our colleagues who ask how we can afford to pay for this, I want to tell them to ask Patricia Jackson—or any of their constituents—because the real question is: How can we afford not to? Especially at a time when the economy is struggling and the costs of care are rising, we need to do everything we can to rein in those costs, prevent people from losing their coverage and having to seek more expensive care in our emergency rooms.

Tonight we will hear from our President. He knows that doing nothing is not an option. The time is right, the time is now. Patricia, her family, and the millions of hard-working, taxpaying Americans across the country simply cannot wait any longer.

I urge our Senate colleagues to set aside the rhetoric and begin to look at the issues and help us solve this problem so we can move this forward.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

CONCLUSION OF MORNING BUSINESS

Mr. REID. I now ask that morning business be closed.

The PRESIDING OFFICER. Morning business is closed.

DEPARTMENT OF DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2010—Continued

Mr. REID. Mr. President, what is the pending business?

The PRESIDING OFFICER. S. 1390, the Defense Department authorization bill.

CLOTURE MOTION

Mr. REID. Mr. President, I have a cloture motion at the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The legislative clerk read as follows: $\frac{\text{CLOTURE MOTION}}{\text{CLOTURE MOTION}}$

We, the undersigned Senators, in accordance with the provisions of rule XXII of the

Standing Rules of the Senate, hereby move to bring to a close debate on Calendar No. 89, S. 1390, the National Defense Authorization for Fiscal Year 2010.

Carl Levin, Harry Reid, Barbara Boxer, Mark Udall, Jack Reed, Jon Tester, Jeanne Shaheen, Al Franken, Evan Bayh, Patrick J. Leahy, Richard J. Durbin, Byron L. Dorgan, Daniel K. Inouye, Blanche L. Lincoln, Joseph I. Lieberman, Ron Wyden, Mary L. Landrieu.

Mr. REID. Mr. President, I ask unanimous consent that the mandatory quorum call be waived.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. REID. Mr. President, this week, we are considering important legislation to authorize spending for the Department of Defense. Among the many activities supported by this funding are our efforts to fight al-Qaida, the Taliban, and other terrorist groups around the world and prevent another terrorist attack on our country.

The bill includes funding for a number of key priorities relating to our fight against terrorists. It provides \$130 billion to fund our efforts in Afghanistan and Iraq. Afghanistan remains the front line in the battle against terrorism, as it provides a haven for thousands of Taliban and al-Qaida fighters. And, as U.S. troops pull back from Iraqi cities, our mission in that country will increasingly focus on counterterrorism. It funds a number of key initiatives to enhance the safety of our troops and our citizens from terrorist threats, including funding for detecting and defeating improvised explosive devices, or IEDs. It funds some of our most important efforts to prevent unsecured nuclear material from falling into the hands of terrorists. It expands the size of our Special Operations Forces—the elite commando units like Navy SEALs and Army Green Beretswho lead this Nation's global ground fight against terrorism.

While the Special Operations Forces provide us a unique and unsurpassed capability, they are hardly the only group of Americans on the front lines of this fight. The Special Operations Forces are part of one of three key groups of people in our government who play a critical role in this fight. Military service members, who are fighting house-to-house, street-tostreet, and village to village in Iraq and Afghanistan to identify and eliminate terrorists and insurgents. Members of the Foreign Service and USAID who, in addition to carrying out our Nation's diplomacy, are working with local leaders to build governing capacity, improve essential services, and foster economic growth. And members of our Nation's intelligence agencies, who provide the vital information we need both to keep these other public servants out of harm's way and to take the fight to the terrorists.

I want to pause for a moment to recognize and commend their tremendous service to our Nation. The courage, endurance, and sacrifice they exhibit on a